MARYLAND-NATIONAL CAPITAL PARK & PLANNING COMMISSION

M-NCPGC Workplace Safety
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June 29, 2018

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I. EXECUTIVE SUMMARY

A. Overall Perspective

During the 2017 risk assessment process, concerns were raised regarding the:

- use of personal protection equipment (PPE) in the field; and
- the completion of facility safety audits/inspections.

Risk management is a broad topic which covers many areas and requires expertise from many different employees or groups within the Maryland-National Capital Park and Planning Commission (M-NCPPC or Commission). The Audit Scope section of this report (pg. 3) provides details on the audit scope and limitations.

During this audit, the Office of the Inspector General (OIG) primarily referred to three (#3) Commission policy documents:

- Commission Practice 2-36, *Workplace Safety*
- Commission Practice 2-21, *Risk Management*; and
- *M-NCPPC Risk Management and Safety Manual*
  - Section 5.24 Personal Protective Equipment; and
  - Section 6.01 Risk Management Plan.

In addition to Commission policy documents, the Commission must follow guidelines promulgated by the Occupational Safety and Health Administration (OSHA), Maryland Occupational Safety and Health Administration (MOSHA) and Environmental Protection Agency (EPA).

The following definitions and list of responsibilities are included to provide additional information on some of the stakeholders responsible for ensuring workplace safety throughout the Commission.

**The Office of Risk Management and Safety (ORMS)** is located within the Department of Human Resources and Management (DHRM), Corporate Policy and Management Operations Division. Commission Practice 2-21, *Risk Management* defines the Commission’s Risk Management Program operations, provides policy for the control of risks, and assigns responsibilities for carrying out program requirements.

ORMS plans and coordinates a safety program for all Commission activities, to include education and training in injury prevention, mandated safety and health regulations, emergency preparedness, driver improvement and license monitoring programs, accident investigations and facility inspections.
The ORMS has 6 employees including 3 Senior Safety Specialists, 1 Senior Liability Claim Specialist, 1 Senior Worker's Compensation Specialist and a Risk Manager who provides oversight of the unit.

**Commission Department Heads** are responsible for implementation of and compliance with Commission safety policies and procedures. In addition, they are responsible for:

- Supporting Commission-wide safety programs and initiatives;
- Ensuring that employees/supervisors comply with established Commission policies on safety and health;
- Ensuring employees attend necessary safety education/awareness training;
- Ensuring facilities comply with established safety standards;
- Taking immediate remedial action to remove identified hazards in the workplace; and
- Handling violations of policy in a consistent and timely manner to include appropriate disciplinary action\(^1\).

**Safety Committees** are appointed by the Director of Parks in Montgomery County and by the Director of Parks and Recreation in Prince George’s County. Each Committee has a Planning Department representative in addition to persons from each Park and Recreation Department. Generally, both Committees will review accidents and injuries, conduct inspections, conduct safety training, advise Department Heads and the Risk Manager on ways for improving the M-NCPPC loss control efforts, and assist in safety awareness campaigns.\(^2\)

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\(^1\) Practice 2-36, *Workplace Safety*

\(^2\) M-NCPPC Risk Management and Safety Manual, Section 6.01.
B. Audit Objective, Scope, and Methodology

The objective of the audit was to: 1) review procedures applicable to the issuance and use of required safety equipment and 2) ensure facility inspections/audits are being completed as required by Commission policies and procedures.

The scope of our audit included, but not was not limited to, the following audit procedures:

- Interviewed employees of ORMS;
- Reviewed pertinent Commission policies, procedures, notices and manuals;
- Reviewed relevant source documents including inspection reports, checklists, plans, forms and programs;
- Evaluated internal processes and procedures in place within ORMS;
- Interviewed Commission employees at various field facilities/sites;
- Evaluated internal processes and procedures in place within field locations;
- Conducted observations of certain field facilities/sites; and
- Observed certain equipment and/or machinery.

Scope Limitation(s): The OIG did not perform any safety inspections or assessments. The OIG is not opining on Commission compliance with external safety regulations (e.g. OSHA, MOSHA, EPA).

This audit was conducted in accordance with Generally Accepted Government Auditing Standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

The period covered in this review was January 1, 2017 – May 15, 2018.
C. Major Audit Concerns

The results of our evaluation and testing procedures did not indicate any major audit concerns.
D. Overall Conclusions

The results of our evaluation and testing procedures indicate deficiencies in the internal controls concerning workplace safety, see definition below.

We believe all weaknesses identified and communicated are correctable and that management’s responses to the recommendations satisfactorily address the concerns. It is the responsibility of management to weigh possible additional cost of implementing our recommendations in terms of benefits to be derived and the relative risks involved.

We wish to express our appreciation to the Risk Management and Safety Office, Prince George’s County Department of Parks and Recreation and the Montgomery County Department of Parks, management and staff for the cooperation and courtesies extended during our review.

Robert Feeley, MBA, CFE, CAA, CGFM, CICA
Assistant Inspector General

Renee M. Kenney, CPA, CIG, CIA, CISA
Inspector General

June 29, 2018

Conclusion Definitions

<table>
<thead>
<tr>
<th>Conclusion Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Satisfactory</td>
<td>No major weaknesses were identified in the design or operation of internal control procedures.</td>
</tr>
<tr>
<td>Deficiency</td>
<td>A deficiency in the design or operation of an internal control procedure(s) that could adversely affect an operating unit’s ability to safeguard assets, comply with laws and regulations, and ensure transactions are properly executed and recorded on a timely basis.</td>
</tr>
<tr>
<td>Significant Deficiency</td>
<td>A deficiency in the design or operation of an internal control procedure(s) which adversely affects an operating unit’s ability to safeguard assets, comply with laws and regulations, and ensure transactions are properly executed and reported. This deficiency is less severe than a material weakness, yet important enough to merit attention by management.</td>
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<tr>
<td>Material Weakness</td>
<td>A deficiency in the design or operation of an internal control procedure(s) which may result in a material misstatement of the Commission’s financial statements or material impact to the Commission.</td>
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II. DETAILED COMMENTARY AND RECOMMENDATIONS

Office of Risk Management and Safety (ORMS)

1. Strengthen Communications with Departments

Issue: The current Risk Management Plan states that “Safety Audits and Inspections are conducted periodically (at least annually) to help ensure compliance with Commission safety standards as well as other local, state, and federal regulations.”

Per the ORMS Risk Manager, in calendar year 2017 ORMS performed 33 planned safety audits/inspections and are on track to complete another 33 planned safety audits/inspections in 2018. The inspections are risk based. ORMS prefers to complete the inspections on a surprise basis to help ensure they witness actual operations. They also complete numerous unplanned investigations, and respond to unforeseen emergencies (e.g. flooding).

Department management does not fully understand the work program of ORMS, specifically, what facilities and maintenance yards are scheduled for annual inspection. In addition, department management stated they are not fully aware of all aspects/requirements of a facility safety inspections.

Criteria/Risk: Failure to communicate an approved annual inspection plan may provide false assurance to Department management who presume all Commission facilities are subject to annual inspections.

Additional guidance on the scope of planned facility inspections will help department management prepare for an audit, and reduce overall safety issues.

Recommendation: The OIG recommends that ORMS update their Risk Management Plan to better align with their available resources, (e.g. remove reference of annual inspections). In addition, ORMS should increase communications with department management when developing their annual inspection plan. Department management may be able to provide additional guidance on specific facility risks not known to ORMS.

Issue Risk: Medium

Management Response: The Risk Management Plan will be updated to remove the reference to “annual” inspection. As there are only three Safety Specialists funded for the Risk and Safety Management Office (ORMS), the ORMS will develop and maintain an Annual Inspection Schedule. The Annual Inspection Schedule will be based on a risk analysis of greatest impact of inspections due to facility size, intended use of the facility, and services delivered. Other risk factors include potential for accidents, reported
concerns/claims, relevant/evolving regulatory compliance issues, etc. The team’s 33 completed, planned inspections in the last year reflect a very aggressive schedule, and it would be very difficult to increase the number of inspections without deterring from the quality of this work and maintaining other critical portions of the work program.

Management also supports working with department managers to help guide inspection activities, as this should lead to better communication and improvements in corrective and abatement outcomes. The ORMS will provide a copy of the Annual Inspection Schedule to each Department annually for review.

**Expected Completion Date:** August 2018

**Follow-Up Date:** January 2019
2. **Clarify Responsibilities for Departmental Safety Committees**

**Issue:** The M-NCPPC Risk Management and Safety Manual (Safety Manual) states safety committees “conduct inspections”. However, department management is unclear on the specific roles and responsibilities of their respective safety committees (e.g. training, inspections, etc.)

In addition, current inspection practices/requirements at the department level are not consistent. Members of the safety committee are not aware of the Facility Self Inspection Checklist\(^3\) maintained on ORMS’ website.

**Criteria/Risk:** Failure to define specific roles for safety committee inspections may result in:
- gaps of inspection coverage (e.g. specific functions such as tree trimming may be overlooked by one department);
- inaccurate inspections; and
- lack of inspections (failure to inspect planned facilities).

**Recommendation:** We recommend ORMS clarify the roles and responsibilities of the department safety committees and ORMS in the Safety Manual. ORMS should adopt a critical oversight role that provides guidance and training to the safety committees.

In addition, we recommend ORMS develop a training program for the safety committees to ensure facility safety inspections are completed in a consistent manner.

**Issue Risk:** Medium

**Management Response:** The ORMS will develop an agency-wide Executive Safety Committee (ESC) to meet on a quarterly basis. The ESC will be chaired by the Risk and Safety Manager and include the Chairperson from the Montgomery Parks and Prince George’s Parks and Recreation Safety Committees. The ESC will provide direction and set agendas for the Departmental Safety Committees.

The ESC will assist with establishing training protocols for safety awareness programs, OSHA compliance and facility inspection programs.

**Expected Completion Date:** September 2018

**Follow-Up Date:** January 2019

3. Clarify Review Requirements of the PPE Program

Issue: Section 5.24 of the Safety Manual contains specific procedures for the control, use, and care of personal protective clothing and equipment (PPE). PPE includes all clothing and work accessories designed to protect employees from workplace hazards (e.g. safety glasses, face shields, respirators, gloves, hard hats, work boots and hearing protection).

ORMS has not conducted an annual review of the Personal Protective Equipment (PPE) Program as required by their Safety Manual. Per discussions with the ORMS Risk Manager, the plan is reviewed on an on-going basis, (e.g. changes in regulations, identified trends in safety occurrences, etc.)

Criteria/Risk: Internal operations should align with documented internal procedures.

Recommendation: ORMS should update the Safety Manual to reflect on-going assessments of the PPE Program, instead of required annual updates.

Issue Risk: Low

Management Response: Section 5.24 of the Safety Manual will be updated to reflect the recommended change in language. The language will be changed from: “Conduct an annual review and make revisions as necessary” to “Conduct ongoing assessments of the PPE Program”.

Expected Completion Date: August 2018

Follow-Up Date: January 2019
Prince George’s County Department of Parks and Recreation (PGC Parks & Rec)

1. Document Infractions of Employees Failing to Wear PPE’s

Issue: Supervisors are not consistently documenting employees’ failure to use PPE. Supervisors interviewed on our field visits stated, if an employee is observed not wearing or using a PPE as required, they are asked to comply with safety requirements. Supervisors then ensure the employee immediately acquires the PPE. These informal requests to use PPE are not documented.

Criteria/Risk: The Safety Manual states employees shall use the appropriate PPE as determined by hazard assessments and trainings.

In addition, we were informed by an OSHA Safety Advisor, during an OSHA conducted enforcement audit, compliance officers request documentation of employee infractions for failing to wear PPE’s.

Recommendation: Senior level department management, in conjunction with the Department of Human Resources and Management (DHRM), should define guidelines for documenting an employee’s failure to use PPE’s. It is understood that some infractions are minor and may not warrant documentation.

Once defined, facility supervisors should be provided additional guidance on documenting an employee’s failure to use PPE’s. Guidelines should be established to ensure repeat offenses are appropriately escalated.

Issue Risk: Medium

Management Response: Concur. We will work through our Departmental Safety Committee, in conjunction with DHRM’s Office of Risk Management and Montgomery County Department of Parks to develop guidelines for documenting the corrective actions that Supervisors take to enforce the appropriate use of PPE.

Expected Completion Date: December 2018

Follow-Up Date: January 2019
2. **Strengthen Security of PPE’s**

**Issue:** PGC facilities are inconsistent in their secure storage of PPE’s. Some facilities secure PPE’s on site, and some allow employees to keep all available PPE’s within their work trucks. There are not adequate controls in place to account for unsecured PPE’s. For example, an employee may misplace his/her PPE’s without supervisor approval and/or consequences.

**Criteria/Risk:** Secure storage of PPE’s reduces opportunities for fraud, waste, and abuse.

**Recommendation:** Facility management should take additional steps to ensure PPE is adequately secured. Additional controls should be balanced with the cost of implementation.

Facilities may want to consider leasing a PPE vending machine which allows management to track disbursements of safety supplies by employee ID number. The vendor, Fast Solutions, provides an invoice monthly for what is extracted from the machine by employees and restocks the safety supplies. Southern Parks Division in MC Parks is using this vending machine.

**Issue Risk:** Medium

**Management Response:** Concur. We will work through our Departmental Safety Committee, in conjunction with DHRM’s Office of Risk Management and Montgomery County Department of Parks to develop guidelines for assuring that PPE is appropriately secured.

**Expected Completion Date:** December 2018

**Follow-Up Date:** January 2019
Montgomery County Department of Parks (MC Parks)

1. Establish a Safety Committee for MC Parks

Issue: Montgomery County Department of Parks and Department of Planning does not have a safety committee.

Criteria/Risk: Commission Practice No. 2-21, Risk Management, requires the establishment of a safety committee in each County. Per the Safety Manual, the Director of Montgomery County Department of Parks should appoint a safety committee. Safety committees should consist of a cross section of the county’s Commission activities.

Recommendation: The Director of Montgomery County Department of Parks should immediately establish a safety committee. A representative from Montgomery County Planning Department should be included.

Issue Risk: Medium

Management Response: At the Deputy Directors direction, the Division Chief, Montgomery County Parks, will reconvene the Montgomery County Safety Committee. Committee will meet the guild lines established in Practice No. 2-21, working cooperatively with ORMS and the Prince Georges County Safety Committee.

Expected Completion Date: September 2018

Follow-Up Date: January 2019
2. **Document Infractions of Employees Failing to Wear PPE’s** See page 11

**Issue:** Supervisors are not documenting employees’ failure to use PPE as required. Supervisors interviewed on our field visits stated, if an employee is observed not wearing or using a PPE as required, they are asked to comply with safety requirements. Supervisors then ensure the employee immediately acquires the PPE. These informal reprimands or requests to use PPE are not documented.

**Criteria/Risk:** M-NCPPC Risk Management and Safety Manual states employees shall use the appropriate PPE as determined by hazard assessments and trainings.

In addition, we were informed by an OSHA Safety Advisor, during an OSHA conducted enforcement audit, compliance officers request documentation of employee infractions for failing to wear PPE’s.

**Recommendation:** Management should require facility supervisors to document employee infractions for failing to use PPE’s when required. Guidelines should be established to ensure repeat offenses are appropriately escalated.

**Issue Risk:** Medium

**Management Response:** Concur. We will work through our Departmental Safety Committee, in conjunction with DHRM’s Office of Risk Management and Prince Georges County Safety Committee to develop guidelines for documenting the corrective actions that Supervisors take to enforce the appropriate use of PPE.

**Expected Completion Date:** December 2018

**Follow-Up Date:** January 2019
3. **Strengthen Security of PPE’s See page 12**

**Issue:** Montgomery County facilities are inconsistent in their secure storage of PPE’s. There are not adequate controls in place to account for unsecured PPE’s. For example, an employee may misplace his/her PPE’s without supervisor approval and/or consequences.

**Criteria/Risk:** Secure storage of PPE’s reduces opportunities for fraud, waste, and abuse.

**Recommendation:** PPE’s should be securely stored and issued by Supervisors to employees when required.

Facilities may want to consider leasing a PPE vending machine which allows management to track disbursements of safety supplies by employee ID number. The vendor, Fast Solutions, provides an invoice monthly for what is extracted from the machine by employees and restocks the safety supplies. Southern Parks Division in MC Parks is using this vending machine.

**Issue Risk:** Medium

**Management Response:** Concur. We will work through our Departmental Safety Committee, in conjunction with DHRM’s Office of Risk Management and Prince Georges County Safety Committee to develop guidelines for assuring that PPE is appropriately secured.

**Expected Completion Date:** December 2018

**Follow-Up Date:** January 2019